


Government of the District of Columbia
Office of the Chief Financial Officer



Jeff DeWitt
Chief Financial Officer

MEMORANDUM

TO: The Honorable Phil Mendelson
Chairman, Council of the District of Columbia

FROM: Jeff DeWitt
Chief Financial Officer 

DATE: November 13, 2014

SUBJECT: Fiscal Impact Statement – “Behavioral Health System of Care Act of 2014”

REFERENCE: Bill 20-676, Draft Committee Print shared with the Office of Revenue Analysis on November 3, 2014

Conclusion

Funds are not sufficient in the FY 2015 through FY 2018 budget and financial plan to implement the bill. It will cost \$440,000 in FY 2015 and \$2.6 million over the four-year budget and financial plan period to implement the bill.

Background

The bill creates the Behavioral Health Access Project (“Project”) which will be run by the Department of Behavioral Health (DBH). The Project will train pediatricians to identify mental illness in children so pediatricians can screen for mental illness during a child's well-care visit. The Project then helps the pediatricians streamline treatment for the children they have identified as having mental health issues. It also creates a team of mental health professionals to provide consultative and referral services to youth under the age of 22 who exhibit a possible mental health or substance use disorder. The Project serves all youth, regardless of insurance coverage.

Financial Plan Impact

Funds are not sufficient in the FY 2015 through FY 2018 budget and financial plan to implement the bill. It will cost \$440,000 in FY 2015 and \$2.6 million over the four-year budget and financial plan period to implement the bill.

DBH already runs a program that increases collaboration between pediatricians and behavioral health specialists and improves the identification and treatment of child mental health problems. It

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is called the Mental Health Access in Pediatrics DC, or DC MAP, and it serves children enrolled in the District's Medicaid managed care organizations. DBH allocated \$500,000 for DC MAP in FY 2015.

DC MAP does many of the same things as the Project the bill creates. However, there are a few differences that make the cost of the Project greater than the \$500,000 allocated to DC MAP:

- The Project requires outreach to all pediatricians in D.C., while DC MAP only works with physicians serving children enrolled in Medicaid managed care organizations. DBH estimates there are around 500 pediatricians who serve District children. DC MAP currently works with 130 pediatricians.
- The Project provides consultative and referral services to any youth under 22 regardless of insurance coverage. Under DC MAP children can see their primary care physician for these services since they are enrolled in a Medicaid managed care organization.
- The Project provides care coordination for youth requiring behavioral health treatment, which DC MAP does not do. DBH would need dedicated staff to conduct the regular follow up and monitoring required for this.

The costs of implementing the Project are in the table below.

Fiscal Impact of the Behavioral Health System of Care Act of 2014, FY 2015 - FY 2018					
	FY 2015¹	FY 2016	FY 2017	FY 2018	4-Year Total
Cost of Project Staff ²	\$580,000	\$900,000	\$940,000	\$980,000	\$3,400,000
Cost of Operations and Supplies ³	\$190,000	\$290,000	\$300,000	\$310,000	\$1,090,000
Funds allocated to DC MAP	(\$330,000)	(\$510,000)	(\$530,000)	(\$540,000)	(\$1,910,000)
Total Fiscal Impact	\$440,000	\$680,000	\$710,000	\$750,000	\$2,580,000

Table Notes

¹Assumes legislation goes into effect February 2015.

²Staff include two part-time managers, one psychiatrist, three social workers, one pediatric practice evaluator, two family support partners, and one receptionist. Assumes annual cost increase of 4 percent.

³Includes marketing materials and outreach, office supplies, phone and website expenses, local travel, academic centers, training, monitoring, and clinical support. Assumes annual cost increase of 2.5 percent.